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PTO/SB/21 (09-04)

**TRANSMITTAL
FORM**

(to be used for all correspondence after initial filing)

Total Number of Pages in This Submission

Application Number	10/734,490
Filing Date	December 11, 2003
First Named Inventor	ZDEBLICK, MARK
Art Unit	3739
Examiner Name	Unassigned
Attorney Docket Number	021308-000510US

ENCLOSURES (Check all that apply)

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| <input type="checkbox"/> Fee Transmittal Form
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PTO/SB/08A & PTO/SB/08B
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Remarks	The Commissioner is authorized to charge any additional fees to Deposit Account 20-1430.
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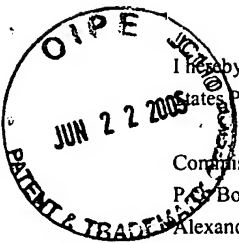
SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT

Firm Name	Townsend and Townsend and Crew LLP		
Signature			
Printed name	James M. Heslin		
Date	June 20, 2005	Reg. No.	29,541

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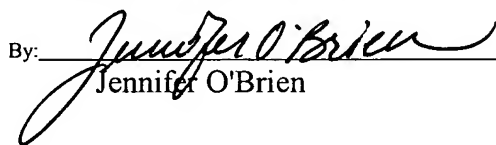
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PATENT
Attorney Docket No.: 021308-000510US

On 6-20-05

TOWNSEND and TOWNSEND and CREW LLP

By:


Jennifer O'Brien

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

In re application of:

ZDEBLICK et al.

Application No.: 10/734,490

Filed: December 11, 2003

For: METHOD AND SYSTEM FOR
MONITORING AND TREATING
HEMODYNAMIC PARAMETERS

Examiner: Unassigned

Art Unit: 3739

SUPPLEMENTAL INFORMATION
DISCLOSURE STATEMENT UNDER 37
CFR §1.97 and §1.98

Commissioner for Patents
P.O. Box 1450
Alexandria, VA 22313-1450

Sir:

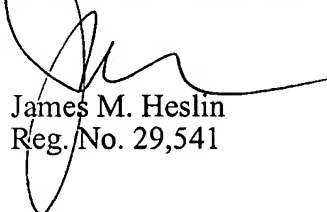
The references cited on attached form PTO/SB/08A and PTO/SB/08B are being called to the attention of the Examiner. Copies of the references are not enclosed. It is respectfully requested that the cited references be expressly considered during the prosecution of this application, and the references be made of record therein and appear among the "references cited" on any patent to issue therefrom.

Also enclosed is a copy of the Search/Examination report corresponding to the PCT application.

As provided for by 37 CFR 1.97(g) and (h), no inference should be made that the information and references cited are prior art merely because they are in this statement and no representation is being made that a search has been conducted or that this statement encompasses all the possible relevant information.

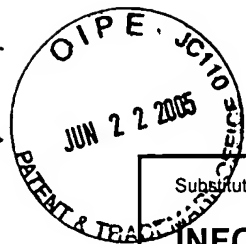
Applicant believes that no fee is required for submission of this statement. However, if a fee is required, the Commissioner is authorized to deduct such fee from the undersigned's Deposit Account No. 20-1430. Please deduct any additional fees from, or credit any overpayment to, the above-noted Deposit Account.

Respectfully submitted,



James M. Heslin
Reg. No. 29,541

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Substitute for form 1449A&B/PTO

**INFORMATION DISCLOSURE
STATEMENT BY APPLICANT**

(use as many sheets as necessary)

Sheet 1 of 1

Complete if Known

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Filing Date	December 11, 2003
First Named Inventor	ZDEBLICK, MARK
Art Unit	3739
Examiner Name	Unassigned
Attorney Docket Number	021308-000510US

U.S. PATENT DOCUMENTS+

Examiner Initials*	Cite No. ¹	Document Number	Publication Date MM-DD-YYYY	Name of Patentee or Applicant of Cited Document	Pages, Columns, Lines, Where Relevant Passages or Relevant Figures Appear
		Number Kind Code ² (if known)			
	AA	5,593,430	01-14-1997	Renger	
	AB	5,999,848	12-07-1999	Gord et al.	
	AC	6,301,500 B1	10-29-2001	Van Herk et al.	
	AD	6,473,653 B1	10-29-2002	Schallhorn et al.	
	AE	6,477,395 B2	11-05-2002	Schuman et al.	
	AF	6,477,417 B1	11-05-2002	Levine	
	AG	2002/0120186 A1	08-29-2002	Kiemel	

FOREIGN PATENT DOCUMENTS

Examiner Initials*	Cite No. ¹	Foreign Patent Document			Publication Date MM-DD-YYYY	Name of Patentee or Applicant of Cited Document	Pages, Columns, Lines, Where Relevant Passages or Relevant Figures Appear	T ⁶
		Country Code ³	Number ⁴	Kind Code ⁵ (if known)				
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NON PATENT LITERATURE DOCUMENTS

Examiner Initials *	Cite No. ¹	Include name of the author (in CAPITAL LETTERS), title of the article (when appropriate), title of the item (book, magazine, journal, serial, symposium, catalog, etc.), date, page(s), volume-issue number(s), publisher, city and/or country where published.	T ²

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* EXAMINER: Initial if reference considered, whether or not citation is in conformance with MPEP 609. Draw line through citation if not in conformance and not considered. Include copy of this form with next communication to applicant.

¹ Applicant's unique citation designation number (optional). ² Applicant is to place a check mark here if English language Translation is attached.